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ABSTRACT

Sex differences in absence from work were investigated for parents and non-parents during a period of eleven months. The four categories investigated were forty-nine women and forty-seven men with children and forty-seven women and forty-seven men without children. No significant sex differences in sick leave were revealed by official personnel records for the non-parent group. Among working parents, the records showed that mothers took significantly more sick leave than fathers. By using self-reports obtained under protection of anonymity it was found that in the parent group both sexes reported absences necessitated by child care as personal illness, but significantly more women than men were absent from work for such activities. Therefore, the working mothers had a higher incidence of absences labeled as sick leave which in reality were used for child care. As hypothesized, child care, rather than personal illness, appeared to be the major variable which mediated sex differences in absence from work. (Author/YLB)

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SEX DIFFERENCES IN ABSENCE FROM WORK: A REINTERPRETATION

by

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Abstract

Sex differences in absence from work were investigated for parents and non-parents during a period of 11 months. No significant sex differences in sick leave were revealed by official personnel records for the non-parent group. However, among working parents, the records showed that mothers took significantly more sick leave than fathers ($p < .05$). By using self-reports obtained under protection of anonymity it was found that in the parent group both sexes reported absences necessitated by child care as personal illness, but significantly more women than men were absent from work for such activities ($p < .01$). Therefore, the working mothers had a higher incidence of absences labeled as sick leave which in reality were used for child care. Results obtained in this study provide the underlying meaning to the assertion that "women are more likely than men to be absent from work because of illness" (U.S. Department of Labor Bureau Bulletin, 1977). As hypothesized, child care, rather than personal illness appears to be the major variable which mediates sex differences in absence from work.

Sex Differences In Absence From Work:
A Reinterpretation

The clarification of variables leading to absence from work is a crucial issue at a time when dual worker families are increasing. Labor force participation has increased for mothers (Bednarzik and Klein, 1977) and in particular has risen more rapidly for wives with pre-school children under six years old than for mothers with school-age children 6-17 years old (Johnson, 1979). At the same time attitudes and statistics exist which create barriers to the occupational aspirations of women. O'Leary (1974) summarized some of the prevalent male attitudes which might adversely affect women in the work force. One of these attitudes is that women require an inordinate amount of sick leave due to menstruation and pregnancy. Furthermore, although research on sex differences in absence from work has yielded conflicting results (Loring and Wells, 1972; Hedges, a. 1977; b. 1973; Hedges, et al. 1979) the U.S. Department of Labor (1977) reported that "women are considerably more likely than men to be absent from work because of illness" (p.55).

It has been reported that single women have the same rate of absence from work as single men and that greatest sex differences in such absences are found for the age group 25-34 years (Hedges, a. 1977; b. 1973). Therefore, the present study was designed to see whether sex differences in absence from work could be due to a discrepancy between role demands faced by working mothers and fathers. Research has consistently documented such a discrepancy even in households where the mother works a 40-hour week (Adams and Winston, 1980). Taking care of a sick child or taking a child to a doctor/dental appointment is not usually a compensable absence, therefore, a parent may report such an absence as personal illness rather than child care activities. Although both sexes may use personal illness as an excuse for such absence this practice would inflate particularly female

sick leave absences because of the greater amount of child care responsibilities women assume.

The following hypotheses were developed to explore this possibility.

Hypothesis 1: Sex differences in absence from work will be evident for parents but not for non-parents.

Hypothesis 2: Among working parents, women will more frequentiy than men be absent from work due to child care activities such as taking care of a sick or injured child and taking a child to a doctor/dental appointment. These absences will tend to be reported as personal illness and will produce the spurious appearance that women are more likely than men to be absent from work due to illness.

Method

Respondents

The study was conducted at a large corporation in the Southwestern part of the United States. It was limited to persons who were required to keep daily and weekly time sheets (hourly and salaried non-exempt employees) and who were eligible for sick leave. Participation was voluntary and anonymous. Employees were selected at random from personnel records. The following four categories were formed: 49 women and 47 men with children; 47 women and 47 men without children. Most of the women were clerks and secretaries and most of the men were clerks, accountants, machine operators and security force. According to the corporation, the monthly income of the men and women differed by about $51.00, with the women getting the lower salary.

Procedure

The Questionnaire. The questionnarie, which was filled out anonymously, asked respondents their sex, how many children were living at home, the children's ages, and whether the respondent had to be absent from work due to a child's illness, injury or doctor/dental appointment in the last 11-month period. Those

who answered "yes" were asked whether they took paid personal sick leave to take care of the above child care activities. In addition women were asked how many hours of paid sick leave they used during the 11-month period due to menstruation and whether they had been pregnant during this time frame.

The questionnarie was returned by 45 women with children living at home (average number of children was 1.62 and their average age was 8.16 years), 38 men with children living at home (average number of children was 1.68 and their average age was 8.52 years), 45 men without children and 40 women without children. During some part of the 11-month time frame of the study 5 women with children and 4 women without children had been pregnant.

Personnel Records. Personnel records were used to obtain the four respondent categories, their job classification, and the number of paid personal sick leave hours these employees took during the last 11-month period.

Results

To test the first hypothesis the hours of paid sick leave (determined from personnel records for the 11-month time frame beginning January 1 and ending November 30) were compared for women and men without children. The 47 women averaged 42.49 hours compared to 35.21 hours averaged by the 47 men. As predicted, this difference was not statistically significant ($t=1.03$, $df=92$, $p<.31$). It is important to notice that this group of 47 women included 4 women who had been pregnant during some part of the 11-month time frame. Excluding these 4 persons, the average of the remaining 43 women was 42.7 hours. A t-test between this average and that of the men yielded $t=1.04$, $df=88$, $p<.30$. Finally, the hours of paid sick leave taken by women and men with children were compared. The 49 women averaged 50.48 hours compared to 34.3 hours averaged by the 47 men. As predicted, this difference was statistically significant ($t=2.59$, $df=94$, $p<.01$). Again, it is to be noted that 5 of these women had been pregnant during some part of the

time frame. Excluding these 5 persons, the average of the remaining women with children was 47.7 hours. A t-test between this average and that of the men with children yielded $t=2.14$, $df=89$, $p<.04$.

Responses from the anonymous questionnaire were used to test the second hypothesis. The questionnaire was returned by 45 women and 38 men with children. Thirty of these 45 women and 6 of the 38 men reported that a child's illness or injury or doctor/dental appointment necessitated their absence from work during the 11-months covered by the study. As predicted, this difference was significant (Chi Square=19.71, df=1, $p<.01$). Both men and women tended to report these absences as personal illness, i.e. 5 out of the 6 men and 24 out of the 30 women (Chi Square= 14, df=1, n.s.).

Menstruation appeared to be insignificant as cause of absence from work. The 40 women with children who had not been pregnant during any part of the time frame of the study reported 1.8 hours of sick leave related to menstruation during the 11-month period; the 36 women without children who had not been pregnant reported 2.97 hours during the same period.

Discussion

The results obtained in this study shed light on the nature of sex differences in absence from work. Differences did not appear among non-parents. However, among parents, significantly more mothers than fathers were absent from work due to child care activities. Although both sexes tended to report such absences as personal illness, the fact that mothers assumed a greater amount of child care responsibilities yielded the spurious result that women have more absences due to illness.

Child care, not menstruation or pregnancy, appeared to be the important variable in sex differences in absence from work. The fact that the difference in salaries among women and men was small, makes it also unlikely that the crucial

variable in sex differences in absence from work was level of income. The possible importance of this variable has been discussed (Allen, 1978). Child care appears to be still the responsibility of the mother. Indeed, child care may be the hidden variable which accounts for previous results which show: (1) the same rate of absence for single men and women; and (2) greatest difference in absence for the age group 25-34 years. This possibility has been speculated (Hedges, 1978).

Good child care programs have long been seen as a necessary condition for women's equal opportunity to participate in the labor force. In an androgynous society both fathers and mothers would require such support services. It is of interest to note that in Sweden, despite years of union and government support for a more symmetrical sharing of household responsibilities, husbands still do not share equally in such activities. Furthermore, day-care facilities are still inadequate and, their quality is uneven (Adams and Winston, 1980). In the United States a clear commitment to the use of national resources for day care is still lacking. One can only wonder about the implications of low value of children in a society which fails to grant paid leave to a parent for the health emergencies of the child.

This study indicates the need for a large scale investigation of child care among working parents. Should the present results be corroborated across the United States, policies pertaining to compensable absences might be changed to include caring for a sick child or taking a child to a doctor/dental appointment. Such a change in policy may still leave women with a larger share of child care responsibilities; however, it may stop the perpetuation of myth's pertaining to women's absence from work. Dissipating the myths may alleviate the stress and guilt often found among working mothers (Hoffman, 1974) as well as alleviate the penalties associated with absenteeism, i.e. reduce wages, reduced chances for promotion and increased chances for dismissal (Allen, 1978).

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